MEA SHE	MENT							
	MENT TRANSMITTAL LETTER							
Application		Filing [	li l	Examiner	Art Unit			
10/761,262-Co	nf. #2578	January 2	2, 2004	S. D. Maki	1733			
pplicant(s): Hiro	aki KAJITA							
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S Amendment ommissioner for F O. Box 1450 exandria, VA 223 ransmitted here	13-1450	ndment in the	ahove identifi	ed application				
The fee has been calculated and is transmitted as shown below.  CLAIMS AS AMENDED								
	Claims Remaining After Amendment	Highest Number Previously Pald	Number Extra Claims Present	Rate				
Total Claims	17	- 40 =		x				
Independent Claims	1	- 6 =		×				
Multiple Depend	ent Claims (ch	eck if applicabl	e)					
Other fee (pleas	450.00							
TOTAL ADDITI	450.00							
x Large Entity				Small Entity				
No additiona	I fee is require	d for this amer	ndment.					
Please charge Deposit Account No. 02-2448 in the amount of \$ .								
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X A check in th	e amount of \$	450.00	is enclos	sed.				
Payment by	credit card. Fo	orm PTO-2038	is attached.					
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x Credit ar	ny overpaymer	nt.						
x Charge a	ny additional fili	ng or applicatio	n processing f	fees required under 37	7 CFR 1.16 and 1.17.			
/ all	[/[			Dated: F	ebruary 14, 2006			
Andrew D. Meik Attorney Reg. N	le lo.: 32,868							
BIRCH, STEWA 8110 Gatehouse Suite 100 East P.O. Box 747 Falls Church, Vi (703) 205-8000	e Road		_P					

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PTO/SB/17 (12-04v2)

Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no person spond to a collection of information unless it displays a valid OMB control number Complete if Known Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/761,262-Conf. #2578 **Application Number** FEE TRANSMITTAL January 22, 2004 Filing Date Hiroaki KAJITA First Named Inventor For FY 2005 **Examiner Name** S. D. Maki Applicant claims small entity status. See 37 CFR 1.27 1733 Art Unit TOTAL AMOUNT OF PAYMENT Attorney Docket No. 0229-0793P 450.00 METHOD OF PAYMENT (check all that apply) Credit Card Check Money Order None Other (please identify): Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP Deposit Account For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayment of x Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES Small Entity** Small Entity **Small Entity Application Type** Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) <u>Fee (\$)</u> Fee (\$) Fee (\$) Utility 300 150 500 250 200 100 200 Design 100 100 50 130 65 200 Plant 100 300 150 160 80 Reissue 300 150 500 250 600 300 Provisional 200 100 0 2. EXCESS CLAIM FEES Small Entity Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 **Total Claims Extra Claims** Fee Paid (\$) **Multiple Dependent Claims** Fee (\$) Fee Paid (\$) Indep. Claims Extra Claims Fee Paid (\$) 1 -6= 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). **Total Sheets** Number of each additional 50 or fraction thereof Extra Sheets Fee Paid (\$) Fee (\$) - 100 = (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$)

SUBMITTED BY					
Signature	1. dl	Registration No. (Attorney/Agent)	32,868	Telephone	(703) 205-8000
Name (Print/Type)	Andrew D. Meikle		2.00	Date	February 13, 2006



Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1251 Extension for response within second month

450.00